

Emergency Drought

State of Washington Application for a Water Right REGION



For Ecology Use Fee Paid 4 0 Date 3/11/05 5mm

Please follow the attached instructions to avoid unnecessary delays.

4 of 4

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name - Flying M Farms

Home Tel:

Mailing Address - 32302 N McDonald RD

Work Tel: (509) 973 -2247

City - Prosser

State WA Zip 99350

FAX:(509) 973 -2412

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION X Same as above

Name - Will Beightol

Home Tel: 509.832.4191

Mailing Address - 32302 N McDonald RD

Work Tel: (509) 973 -2247 ext. 102

City - Prosser

State - WA

Zip 99350

FAX: (509) 973 - 2412

Relationship to applicant - Farm Manager

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 250 gallons per minute (x gallons per minute or \square cubic feet per second) from a \square surface water source or x ground water source (check only one) for the purpose(s) of _Supplemental Irrigation Water ____. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient. Estimate a maximum annual quantity to be used in acre-feet per year: 200 acre ft.

Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be

From: Emergency drought request for 2005 season and request that the application remain pending following 2005

Section 4. WATER SOURCE

If SUR	FACE WA	TER			If GROUND	WATE	R		rings of a larger than	
lake, etc stream,"	. If unname	ed, write "u	icate if stream, nnamed spring		A permit is de	sired for	r	1w	ell(s).	
			ly of water):		Size & depth o	of well(s	s): To be	e determin	ed	
LOCAT	IION									
Enter the section		ith and eas	st-west distan	ces in feet fr	om the point of	divers	ion or v	withdrawa	al to the nearest	
1/4 of	1/4 of	Section	Township R	ange(E/W)	County	Ifik	ocation of	f source is pl	atted, complete belov	w:
							Lot	Block	Subdivision	
S	SE	22	10 N	23 E	Yakima					
SW	NW	23	10 N	23 E	Yakima					

Priority Date: MARCH 1/1

Date Returned

Dept. Of Health #_

Appl. No.:

section to w

11,2005

64-34957

SEPA: Exempt/Not Exempt

Date Accepted As Complete

Date Received: MACCH

FERC License #

For Ecology Use

Sec	ction 5. GENERAL WATER	SYSTEM INFORMATION	
A. B.	Name of system, if named: Briefly describe your proposed water	r system. (See instructions.)	
Irriga		irrigation system. This application is for supplemental wat ight purposes during 2005 season. After 2005 we would like pplemental supply	
C.	Do you already have any water rights PROVIDE DOCUMENTATION. Ro	s or claims associated with this property or system? oza assesses 123 acres	X YES NO
	ction 6. DOMESTIC / PUBLI ompleted for all domestic/publi	IC WATER SUPPLY SYSTEM INFORMA ic supply uses.)	TION
A.	Number of "connections" requested:	Type of connection (Homes, Apartment,	Recreational etc.)
В.	Are you within the area of an approv If yes, explain why you are unable to County Health Department.		☐ YES ☐ NO
Con	nplete C. and D. only if the prop	osed water system will have fifteen or more con	nections.
C.	Do you have a current water system: Washington State Department of Heal If yes, when was it approved?	리아 전 전경 사람들은 프랑이 선생님들은 이번 전투 시간에 있습니다. 그렇지 않는데 그는 이번 사람들이 되었다. 그는 그는 그는 그는 그는 그를 보고 있는데 그를 보고 있습니다. 그를 보고 있습니다.	☐ YES ☐ NO your plan.
D.	Do you have an approved conservation of yes, when was it approved?	on plan? Please attach the current approved version of	☐ YES ☐ NO your plan.
	ction 7. IRRIGATION/AGRI	CULTURAL/FARM INFORMATION Igriculture uses.)	
A.	Total number of acres to be irrigated	: 110	
B.	List total number of acres for other s	pecified agricultural uses:	
	Use - Apples Use - Wine Grapes	Acres 42.5 Acres 68.3	

Use -

Acres

- C. Total number of acres to be covered by this application: 123
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001) Add up the acreage in which you have a controlling interest, including only:
 - ‡ Acreage irrigated under water rights acquired after December 8, 1977;
 - ‡ Acreage proposed to be irrigated under this application;
 - ‡ Acreage proposed to be irrigated under other pending application(s).
 - 1. Is the combined acreage greater than 6000 acres?

☐ YES x NO

Do you have a controlling interest in a Family Farm Development Permit? 2. If yes, enter permit no:

☐ YES x NO

E	Form meet	

Stockwater - Total # of animals (If dairy cattle, see below) Animal type

Dairy - # Milking _____ # Non-milking

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? X YES NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Take Hwy 241 from Sunnyside heading north, take a right heading east on Sheller RD, Right heading north on Harrison, property on right and left side of the road.

Section 10. REQUIRED MAP

Attach a map of the project. (See instructions.)

Attached

Section 11. PROPERTY OWNERSHIP

Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(es)	$x YES \square N$ of the owner(s)
Does the applicant own the land on which the water source is located?	X YES DN
If no, submit a copy of agreement:	

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant (or authorized representative)

J.111.2 Landowner for place of use (if same as applicant, write "same") 3/11/05



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MAR 1 1 2005

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Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From: Emergency drought request for 2005 season and request that the application remain pending following 2005

II SUKF	FACE WA	TER			If GROUND	WATER		
lake, etc. stream,"	. If unname	ed, write '		ream, spring, pring," "unnamed	A permit is de	esired for	_1w	vell(s).
Source fl	lows into (1	name of b	ody of water	r):	Size & depth	of well(s): To b	e determin	ned
LOCAT Enter the		uth and e	ast-west di	stances in feet fr	om the point o	f diversion or	withdraw	al to the nearest
	corner:							
section o		Section	Township	Range(E/W)	County			latted, complete belo
section o		Section	Township	Range(E/W)				
section o		Section 22	Township 10 N			If location of	of source is p	latted, complete belo
section o	1/4 of			23 E	County	If location of	of source is p	latted, complete belo

6434957 Appl. No.:

ECY 040-1-14 Rev. 7/97 * * f

Date Accepted As Complete 03/14/03

Section 5. GENERAL WATER SYSTEM INFORMATION Name of system, if named: Briefly describe your proposed water system. (See instructions.) B. Will pump from well into pond then into the irrigation system. This application is for supplemental water to Roza Irrigation District supply for emergency drought purposes during 2005 season. After 2005 we would like the application to remain pending, to request a permit for supplemental supply

C. Do you already have any water rights or claims associated with this property or system? X YES NO PROVIDE DOCUMENTATION. Roza assesses 123 acres Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.) Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.) В. Are you within the area of an approved water system? ☐ YES ☐ NO If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department. Complete C. and D. only if the proposed water system will have fifteen or more connections. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO If yes, when was it approved? Please attach the current approved version of your plan. D. Do you have an approved conservation plan? ☐ YES ☐ NO If yes, when was it approved? Please attach the current approved version of your plan. Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.) Total number of acres to be irrigated: 110

List total number of acres for other specified agricultural uses: B.

Use - Apples

Acres 42.5

Use - Wine Grapes

Acres 68.3

Use -

Acres

- Total number of acres to be covered by this application: 123 C.
- Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001) D. Add up the acreage in which you have a controlling interest, including only:
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 - Is the combined acreage greater than 6000 acres? 1.

☐ YES x NO

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☐ YES x NO

E.	Farm	uses:
	T CALLEY	

Animal type (If dairy cattle, see below) Stockwater - Total # of animals

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A.	Does the applicant own the land on which the water will be used?	x YES □ NO
	If no, explain the applicant's interest in the place of use and provide the name(s) and a	ddress(es) of the owner(s):
В.	Does the applicant own the land on which the water source is located?	x yes □ no
	If no, submit a copy of agreement:	

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We are returning your application for the following	reason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s) incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested	d above and return your ap	pplication by
Explanation: Please provide the additional information requested (6)		pplication by

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice)

APPLICATION

Ecology is an Equal Opportunity and Affirmative Action employer.

or (360) 407-6006 (TDD).

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.